BLANK PLEASE TYPE OR PRINT Entered previous May Show Ms. Mr. Artist Karol Cornelius (Last Name Last) Permanent Cortis Dr. 44012 Tel. (216) 933-5101 Area Code Zip **Temporary** Address _ Street City Tel. () Area Code Zip Permanent address is in what county? __orall Born in Cuyahoga County 🔲 Yes 🖾 No Collaborator _ If entries are not accepted or not sold: Artist will pick up entries at Museum. Museum should dispose of entries. Museum should ship entries to artist C.O.D. at this address:

The attached card at right will be returned to you as notification of acceptance or rejection by the last week in April.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any entry not called for by the dates listed.

It is also understood that accepted entries will remain on exhibition until June 9, 1974.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

Signature Karol Councilius

ENTRY BLANKS			
☐ 1. Paintings ☐ 2. Graph ☐ 4. Sculpture ☐ 5. Electronic ☐ 5.			
Medium or Materials			
intaglio - etching			
Title Pancing On The L	Vind		
Price or NFS Insurance Value If NFS Only	Size 22" × 25"		
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1974 MAY SHOW

The Cleveland Museum of Art Cleveland, Ohio 44106

Please keep address within this box for window envelope.

Name	Karal Canalius	
Address	149 Curtis Dr.	
City & State	Owon Lake, Phio	Zip 44012

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your notification of acceptance or rejection.

ACCEPTANCE OR REJECTION NOTICE

This is your only receipt to claim your object(s). This notification will be mailed to you following judging.

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